

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

REQUEST FOR REGISTRATION TERMINATION

I (We) _____, hereby notify the
Print Name of Candidate, Noncandidate Committee or State and County Contractor

Campaign Spending Commission ("Commission") of (my) (our) desire to terminate registration with the Commission for the following reasons:

1. (I) (We) will no longer be receiving any contributions or making any expenditures reportable to the Commission under law;
2. The balance of (my) (our) campaign fund is zero. (No Surplus);
3. There are no unpaid expenditures to be paid. (No Deficit);
4. There are no outstanding loans from others to be paid by the Candidate Committee. (No Deficit);
5. There are personal outstanding loans owed to myself (candidate) and I do not wish to be reimbursed by the Candidate Committee. The outstanding loans by myself (candidate) should be considered as a non-reimbursable contribution to my Candidate Committee.

I hereby certify that the information on this report is true, correct and complete statements to the best of my knowledge.

Signature of Candidate, Committee Chairperson of Noncandidate Committee or
State and County Contractor

Date

FOR OFFICE USE ONLY

Reviewed and Approved By

Date